REST AVAILABLE CODY

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

CLAIMS AS FILED - PART					1			SWALL ENTITY		OTHER THAN		
			(Column 1)		(Column 2)			TYPE		OR SMALL ENTITY		צדודא
TOI	AL CLAIMS	25			W.Ar			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			34 minus 20=		• 14			X\$ 9=	,	OR	X\$18=	
INDE	PENDENT CL	AIMS	minus 3 =		<u> </u>			X42=		OR	X84≃	
MUL	TIPLE DEPEN	DENT CLAIM PR				+140=		OR	+280=			
* If t	ne difference i	in column 1 is l	olumn 2		TOTAL		OR	TOTAL				
CLAIMS AS AMENDED - PART II								,		<b>.</b>	OTHER	MANT
(Column 1) (Column 2) (Column 3)								SMALL	YTITM	OR	SMALLE	ENTITY
MTA		CLAIMS REMAINING AFTER AMENDMENT		NUA	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AWENDWENT	Total _	. 25	Minus	2	A.	- ()		X\$ 9=		OR	X\$18=	
E E	Independent	• 1	Minus	***	3	- Ø		X42=	1	OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=.		OR	+280=	
								TOTAL	<b></b>	OR	TOTAL ADDIT. FEE	
Ala	oiloy Ac	(Column 1)	Į.	(Coli	ımn 2)	(Column 3	`	ADDIT. FEE		٠٠٠	ADDIT. FEE	<u>-</u>
	- 10 Y	, CLAIMS	3200	HIG	HEST	Columno	"		ADDI-	7		ADDI-
N. B		REMAINING AFTER AMENDMENT		PREV	MBER MOUSLY D FOR	PRESENT EXTRA		RATE	TIONAL FEE	-	RATE	TIONAL FEE
AMENDMENT	Total	· 23	Minus		25	- Ø		X\$ 9=		OR	X\$18=	
REF	Independent	• 1	Minus	***	3	= 0		X42=		OR	You	
A	FIRST PRESENTATION OF MULTIPLE DEPENDEN				IT CLAIM	一口		-		100		ļi
										OR	II.	
								TOTAL ADDIT FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												• • •
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU PRE\	HEST MBER NOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
202	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
13 A	Independent	•	Minus	***		<u> </u>		X42=		OR	You	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	-		┨‴		
	uluk aabaita cab	uma 4 la loca thes :	de montes and	ma 2 11	to the is a	niumo ?		+140=		OR		
* If th entry in column 1 is less than th mtry in column 2, write "0" is column 3.  ** If th "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, mter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, mter "3."												
	To the "Highest No The "Highest Nur	umber Priviously F mb ir Previously Pa	aid For" (Total o	r Indepe	c is less in	e highest num	ber f	ound in the ap	propriat b	ox in c	okimn 1.	
I												